

BORROWER NAME:	SS#:
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MONTHLY INCOME AND EXPENDITURE STATEMENT

STREET ADDRESS:	
CITY, STATE, ZIP:	HOME PH#:
EMPLOYER:	
EMPLOYER ADDRESS:	
CITY, STATE, ZIP:	WORK PH#:

MONTHLY INCOME

► MONTHLY WAGES

A. YOUR GROSS MONTHLY INCOME	\$	
LESS: FEDERAL TAXES	\$	
STATE & LOCAL TAXES	\$	
MEDICARE BENEFIT TAXES	\$	
FICA BENEFIT TAXES	\$	
NET INCOME FROM WAGES (Gross Income Minus Taxes Withheld)		\$
B. SPOUSE'S NET INCOME FROM WAGES (Gross Income Minus Taxes Withheld)		\$

NUMBER OF PERSONAL EXEMPTIONS CLAIMED

► SOCIAL SECURITY BENEFITS	\$
► VETERANS BENEFITS	\$
► OTHER MONTHLY INCOME (ATTACH PROOF OF INCOME)	\$

SOURCE OF OTHER INCOME:

TOTAL MONTHLY INCOME	\$
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MONTHLY EXPENSES		
▶ MONTHLY MORTGAGE OR RENT PAYMENT ON PRINCIPAL RESIDENCE		\$
▶ UTILITIES:		
GAS/FUEL OIL		\$
ELECTRIC		\$
WATER/SEWER		\$
TELEPHONE		\$
▶ GROCERY AND PERSONAL ITEMS		\$
▶ CAR PAYMENT (PRINCIPAL VEHICLE)		\$
MAKE	MODEL	
YEAR	VIN#	
▶ CAR PAYMENT (SECOND VEHICLE)		\$
MAKE	MODEL	
YEAR	VIN#	
▶ CAR INSURANCE		\$
HOW MANY MILES DO YOU DRIVE TO AND FROM WORK EACH DAY?		
▶ MISCELLANEOUS EXPENSES (LIST SEPARATELY) NOTE: COPIES OF EACH BILL MUST BE ATTACHED		
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
TOTAL MONTHLY EXPENDITURES		\$
<i>I believe I can make monthly payments of</i>		\$
Signature		Date